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ABSTRACT

Children of alcoholics are at risk for socioemotional and behavioral problems. Adult children of alcoholic parents (ACAs) are at risk for problems in interpersonal relationships. ACAs have been found to have decreased self-esteem and self-acceptance in comparison to adults whose parents are not alcoholic (NACAs). College students who were young adult children of alcoholic parents (N=41) and non-alcoholic parents (N=50) were administered the Attachment Interview for Adults, designed to tap security provision, avoidance, ambivalence and/or resistance in the parent-child relationship. The hypothesis that parental alcoholism would negatively affect aspects of the parent-child relationship was supported. In particular, ACAs were significantly less secure and more avoidant and ambivalent/resistant in their relationships with their alcoholic fathers than were NACAs. Additionally, when both parents were alcoholic, ACAs differ from NACAs in attachment security and ambivalence/resistance toward the mother. Increased avoidance in the child-mother relationship was evident only when the mother was the alcoholic parent. However, in this sample the alcoholism of one parent did not affect the ACA's attachment to the non-alcoholic parent. Despite limitations, the results clearly show that ACAs are at risk for disturbed attachment relationships to their alcoholic parent and that this risk is heightened if both parents are alcoholic. (ABL)

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Adult Children of Alcoholics:
Security, Avoidance and Ambivalence in Attachment to Parents

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Running Head: ADULT CHILDREN OF ALCOHOLICS

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Abstract

Young adult children of alcoholic (ACAs; N = 41) and non-alcoholic (NACAs; N = 50) parents were administered the Attachment Interview for Adults, designed to tap security provision, avoidance, ambivalence and/or resistance in the parent-child relationship. The hypothesis that parental alcoholism would negatively affect aspects of the parent-child attachment relationship was supported. In particular, ACAs were significantly less secure and more avoidant and ambivalent/ resistant in their relationships with their alcoholic fathers than were NACAs. Additionally, when both parents were alcoholic, ACAs differed from NACAs in attachment security and ambivalence/resistance toward the mother. Increased avoidance in the child-mother relationship was evident only when the mother was the alcoholic parent. But, in this sample, the alcoholism of one parent did not affect the ACA's attachment to the non-alcoholic parent.

Adult Children of Alcoholics:
Security, Avoidance and Ambivalence in Attachment to Parents

Children of alcoholic parents (COAs) are at risk for socioemotional and behavioral problems (Burk & Sher, 1988). During childhood, problems such as mood disorders, poor peer relations, aggression, and conduct disorders, including substance abuse, are more common among COAs than among the general population (e.g., West & Prinz, 1987; Wilson & Orford, 1978). Adult children of alcoholics (ACAs) are at risk for problems in interpersonal relationships (Burk & Sher, 1988; West & Prinz, 1987). ACAs have been found to have decreased self-esteem and self-acceptance in comparison to adults whose parents are not alcoholic (NACAs) (e.g., West & Prinz, 1987) and, increased incidence of alcoholism and depression among ACAs has been reported (Burk & Sher, 1988; Clair & Genest, 1987; West & Prinz, 1987).

Several risk factors associated with the development of psychopathology, including marital conflict, paternal arrest, low socioeconomic status, and maternal psychiatric disorders are linked with parental alcoholism (Ballard & Cummings, 1990; West & Prinz, 1987). Increased risk among COAs has also been related to parental neglect and the inconsistency and unpredictability in routines, parenting, and discipline that characterize alcoholic homes (e.g., Callan & Jackson, 1986; Cork, 1969). These factors may also be related to an increased likelihood for the formation of insecure attachment relationships (Thompson & Lamb, 1986), which in turn increase

risk for problems in interpersonal relationships, conduct disorders, low self-esteem, and emotional problems, such as depression (Bretherton, 1985; Cummings & Cicchetti, 1990). However, few studies have empirically examined the effects of being reared in an alcoholic family on the parent-child relationship (Scavnicky-Mylant, 1984).

Parental Responsivity, Insecure Attachment, and COAs

The fundamental purpose of the attachment system is the provision of security by the attachment figure to the child during times of stress (Bretherton, 1985; Cummings, 1990). To provide the child with a sense of security, the attachment figure must consistently be available, accessible, and responsive (Bowlby, 1973). Parental alcoholism is likely to result in periodic, if not chronic, emotional and physical unavailability of one or both parents (Creighton, 1985). Certainly, a parent who is inebriated much of the time would not be able to respond consistently and appropriately to a child's emotional and security needs. Likewise, the spouse of an alcoholic may be under-responsive to the needs of the child due to depression or preoccupation with the alcoholic's behavior. Thus, COAs are at risk for the development of insecure attachment relationships, particularly to the alcoholic parent.

Indeed, COAs describe their homes as less secure, happy, affectionate, loving, trusting, warm, and understanding than do children of non-alcoholic parents (NACAs; Callan & Jackson, 1986). Cork (1969) found that COAs, aged 10-16

years, felt that their relationships both within and outside of the family were affected by parental alcoholism, in that the relationships were limited by feelings of insecurity and lack of trust. In general, COAs reported that neither parent was adequate in meeting their emotional needs (Cork, 1969). Finally, Drake and Vaillant (1988) found that adolescent COAs were more likely than NACAs to report poor relationships with both the mother and the alcoholic father. Additionally, they report that a poor relationship with the mother was the strongest predictor of adjustment problems in adolescence.

However, many COAs have positive developmental outcomes and do not develop socioemotional or behavioral problems. Several investigators (e.g., Drake & Vaillant, 1988; Werner, 1986) have found that having a stable, positive relationship with one adult during childhood reduces risk for COAs. That is, COAs who have an emotionally satisfying relationship with at least one primary caretaker are more likely to demonstrate good social, behavioral and academic adjustment.

Assessment of Attachment

Typically, in childhood, attachment has been assessed using the Strange Situation (Ainsworth & Wittig, 1969). Based on children's behavioral responses during a separation-reunion procedure, attachment is classified as either secure, insecure-avoidant or insecure-ambivalent/ resistant (Ainsworth, Blehar, Waters, & Wall, 1978). However, the attachment behaviors of some children cannot be clearly classified into one of these three patterns. Some children

show enough ambivalence/resistance and avoidance to be dual classified (e.g., Sroufe & Waters, 1977). Other children appear disorganized and disoriented, suggesting yet another attachment pattern (Main & Cassidy, 1988; Main & Solomon, 1986). For this reason, among others, Cummings (1990) argues that attachment across the lifespan is best conceptualized along a continuum of security and insecurity, rather than simply as a categorical model.

There is no analogue to the Strange Situation for the assessment of attachment beyond early childhood. The aim of the Strange Situation is to assess attachment behaviors such as proximity seeking, avoidance, resistance, and soothability in a situation (separation from the attachment figure) that is stressful for the child. Clearly, attachment cannot be measured identically in adolescence or adulthood because, (a) separation from and reunion with the attachment figure would not elicit the same attachment behaviors as earlier in life (e.g., Cummings, 1990). And, (b) similar behaviors may not be equivalent in terms of assessing the construct of attachment across developmental levels (see Labouvie, 1980 for a discussion of the equivalence of psychological measures and constructs across age or cohort groups).

Several scales measuring aspects of adult attachment have been devised. These scales are typically aimed at assessing either (a) retrospective childhood attachment to parent(s) (e.g., Parkes, 1991), (b) current adult child-parent relationships (e.g., Kenny, 1987), or (c) a general

adult attachment style (e.g., Hazan & Shaver, 1987). Some of these scales classify attachment relationships categorically, in the tradition of Ainsworth and colleagues (e.g., Hazan & Shaver, 1987), while others (e.g., Kenny, 1987) derive continuous scales from attachment theory (i.e., perceived parental availability, adjustment to separation) for use in data analysis with no categorical assignment of subjects. In the present study, factor analysis was used to derive scales from attachment data to obtain continuous scores on various subscales that tap key constructs underlying attachment, i.e., felt-security, avoidance, resistance, and ambivalence. This approach examines specific attachment behaviors along a continuum, as has been suggested by Cummings (1990), rather then assigning subjects to a particular attachment category.

The purpose of this study was to examine the quality of young adult's <u>current</u> attachment relationships to each of their parents. The prediction guiding this investigation was that the attachment relationships between ACAs and their alcoholic parents would be characterized by significantly lower levels of felt-security and significantly higher levels of avoidance, ambivalence and resistance then the relationships between NACAs and their parents. Additionally, the attachment relationships between ACAs and their non-alcoholic parents were compared to those of NACAs and their parents. But, there was no basis for making specific predictions about these comparisons.

Methods

Subjects

Subjects included 41 ACAs (16 male and 25 female) and 50 NACAs (24 male and 26 female), aged 18-22 years (M = 19.97). Subjects were recruited from the undergraduate population at West Virginia University. During recruitment potential subjects were informed that they would complete interviews and questionnaires regarding parental drinking and their relationships with their parents. ACA status was determined using the Children of Alcoholics Screening Test (CAST) (see below). Of the ACA subjects, both parents were alcoholic in 17 cases, the father only was alcoholic in 18 cases, and the mother only was alcoholic in 6 cases.

Two of the subjects were African-American, two were Hispanic-American, three were Asian-American, and the rest (N = 84) were non-Hispanic-white Americans. Mean socioeconomic status (SES; Hollingshead, 1975) was in the middle class range. There were no significant differences in SES as a function of parental history of alcoholism. Most subjects (N = 61; 23 ACAs and 38 NACAs) came from intact, two parent families. The remainder of the subjects came from single-parent never-married homes (N = 2 NACAs), single-parent divorced homes (N = 22; 13 ACAs and 9 NACAs), or reconstituted families (N = 6; 5 ACAs and 1 NACA).

Measures

The CAST (Jones, 1981) is a 30 item inventory designed to identify COAs by measuring the individual's reported

emotional, cognitive, and behavioral responses to parental drinking (Pilat & Jones, 1984). The CAST has excellent reliability (alpha = .98) and acceptable validity (.78). A cut off score of 6 or above reliably identified 100% of children of clinically diagnosed alcoholics and self-reported COAs (Jones, 1983; Pilat & Jones, 1984). Scores on the CAST are interpreted as follows: (a) 0-1, NACA; (b) 2-5, children of problem drinkers; and (c) 6 or above, COA (Jones, 1983; Pilat & Jones, 1984). Subjects were screened for inclusion in the study; only those scoring from 0-1 (nonalcoholic parent[s]) or 6 or higher (at least one alcoholic parent) on the CAST were included. Children of problem drinkers (CAST scores of 2-5; n = 8) were excluded from the study.

A modified version of the Attachment Interview for Adults (AIA) (Barnas, Pollina, & Cummings, 1990) was used to assess parent-child attachment. The AIA has adequate test-retest reliability and concurrent validity with measures of socioemotional and physical well being (Barnas, et al., 1990). The AIA was modified for use with college students. It consists of 12 yes-no and two open-ended questions designed to educe security provision, avoidance, and/or resistance in attachment relationships.

The yes-no questions addressed the following specific attachment issues: (a) seeking security from the parent during times of stress, (b) the ability of the parent to provide security during such times, (c) if the parent seeks security from the child, (d) the child's ability to provide

security to the parent, (e) resistance to the parent's attempts to help/comfort, (f) extended periods when the child is not in contact with the parent, (g) availability/ efficacy of the parent during times of stress, (h) expectation of using the parent as an attachment figure in the future, (i) expectation of using the parent as an attachment figure during times of stress, (j) ambivalence about the parent's attempts to help/comfort, (k) feelings of being unable to approach the parent for help under some circumstances, and (l) resentment of the parent's attempts to help/comfort.

The first open-ended question (In regard to your close, emotional relationships, who are the most important people to you at this time in terms of emotional support and security?) was coded in terms of whether the subject reported an attachment to one parent only, both parents, a family member other than the parents, a non-family member, or a combination of the above (mixed attachment). Interrater reliability was excellent (Kappa = .94; % agreement = 97%). Responses to the second open-ended question (If you were ever separated from your [mother/ father] due to death or other circumstances, what kind of issues, feelings, or gaps would this present in your life?) were coded as positive, negative, neutral, or ambivalent. Reliability was calculated for the mother (Kappa = .49; % agreement = 97%) and the father (Kappa = .81; % agreement = 97%). Reliability was based on the independent coding of 58 subjects by three research assistants who were blind to the COA status and gender of the subjects.

Procedure

Informed consent was obtained. Subjects completed the CAST twice, once for the father and once for the mother. Then, trained research assistants interviewed the subjects using the Attachment Interview for Adults. Separate interviews were conducted for each parent; the order of the interviews was counterbalanced. Interviews were hand recorded verbatim for later scoring. Finally, subjects were debriefed and ACAs and children of problem drinkers were given information regarding local resources for ACAs.

Results

Analysis Plan

The attachment data were subject to factor analysis; maternal and paternal data were analyzed separately. The 12 yes-no items from the Attachment Interview for Adults and one open-ended question (If you were ever separated from your (mother/father) due to death or other circumstances, what kind of issues, feelings, or gaps would this present in your life?) were used in the factor analyses. Factors were extracted using principle components (PC) analysis. After factor extraction, an oblique rotation (Oblimin) was used as it was likely that the various aspects of attachment would be related. It was expected that the 13 items would yield either three (security, ambivalence/ resistance, and avoidance) or four (security, ambivalence, resistance, and avoidance) factors, depending on whether or not ambivalence and resistance loaded together or separately. After the

factors were derived, reliability for each factor scale was computed using Cronbach's Alpha. Finally, the scales were used to compare ACAs and NACAs in their current attachment relationships with their parents.

Factor Analysis of Attachment Data

Maternal Attachment. The PC analysis extracted four factors, accounting for 64.5% of the variance. Factors representing Security, Avoidance, Ambivalence, and Resistance were derived. Table 1 shows the loadings on the four factors; variables included on each factor are underlined. Variables were retained only on the factor on which they had the highest loading. Items loading on each factor were added to create subscales. The ambivalence and resistance factors were combined to create one subscale as (a) this better fits the traditional theoretical attachment model and (b) prediction of spontaneous self-report of attachment to mother was better when the factors were combined than when they were examined separately (see below).

Insert Table 1 about here

Paternal Attachment. The PC analysis extracted four factors from the paternal attachment data, accounting for 67.4% of the variance. The factors include three theoretically relevant factors similar to those derived for the maternal data - Security, Resistance/ Ambivalence, and Avoidance (see Table 2 for factor loadings; variables loading

on each factor are underlined). The fourth factor included the items that tap (a) whether or not the father turns to the child for help and (b) the child's ability to help the father. As these items are not theoretically relevant in isolation, and as they did not add to the prediction of spontaneous self-report of attachment to the father when combined with the items on the secure factor (see below), this factor was not included in further analyses.1

Insert Table 2 about here

Reliability and Validity of Attachment Subscales

Reliabilities, using Cronbach's Alpha, for all the attachment subscales (the derived factors and the maternal Ambivalent/ Resistant subscale) are reported in Table 3. Reliability is high for the maternal Security and Avoidance subscales and the paternal Security subscale. Reliability estimates for the remainder of the subscales are moderate.

Insert Table 3 about here

Validity was assessed by examining the relation between the scales and whether or not the parent in question was spontaneously listed by the subject as someone important to them in providing emotional support and security. The correlations reported in Table 4 indicate moderate, but significant, correlations between whether or not the subject

spontaneously listed the parent as a source of security and the subjects' scores on the maternal and paternal Security and Avoidance subscales. The maternal Resistant and Ambivalent subscales were not strongly related to security judgement separately, but when combined into a single scale there is significant prediction of self-report of the mother as a source of security. This is not true for the paternal Ambivalent/ Resistant subscale. However, due to the nature of ambivalence, it would not be expected to be related to security judgement in a clearcut manner.

Insert Table 4 about here

Differences in Attachment as a Function of Family History

First, 2 X 2 (family history of alcoholism by gender) ANOVAs were used to assess differences in attachment on each of the subscales across all of the subjects. Then, to tease apart how having one alcoholic parent affected the child's relationship to the non-alcoholic parent, analyses were run using specific subsets of subjects. That is, analyses were performed examining differences in attachment between NACAs and ACAs (1) whose mother only is alcoholic, (2) whose father only is alcoholic, or (3) who have two alcoholic parents.

Maternal Attachment.

Security Subscale. A 2 X 2 (family history of alcoholism by gender) ANOVA that included all of the subjects showed no significant differences in security of attachment

to the mother as a function of family history of alcoholism or gender. As gender was not significant in the above analysis it was dropped from subsequent analyses. One-way ANOVAs comparing NACAs to ACAs whose (a) mothers, but not fathers, were alcoholic2 and (b) fathers, but not mothers, were alcoholic were not significant. However, in comparing NACAs to subjects whose mother and father are both alcoholic, there was a significant effect for family history of alcoholism, F (1,64) = 3.97, $p < .05$. ACAs (M = 3.06; SD = 1.61) had significantly lower scores on the maternal security subscale than NACAs (M = 3.70; SD = .91).

Avoidance Subscale. The family history of alcoholism by gender ANOVA that included all of the subjects yielded a significant main effect for family history of alcoholism, F (1,85) = 3.99, $p < .05$. ACAs were more avoidant in regard to their mothers (M = 3.69, SD = .95; lower scores indicate greater avoidance) than NACAs (M = 3.94, SD = .31). There were no effects for gender and no interactions. The follow-up comparison of NACAs to subjects whose mothers only are alcoholic also yielded a significant main effect for family history of alcoholism, F (1,54) = 6.74, $p < .01$. Children of alcoholic mothers (M = 3.16, SD = 2.04) displayed greater avoidance toward the mother than NACAs. However, there were no significant differences in avoidance toward the mother between NACAs and either (1) children of alcoholic fathers or (2) subjects with two alcoholic parents.

Ambivalent/ Resistant Subscale. There was a main effect

of family history of alcoholism for Ambivalence/ Resistance toward the mother (F [1,87] = 7.17, $p < .01$) when all subjects were included. ACAs (M = 1.49; SD = 1.6) displayed more ambivalence/ resistance toward the mother than NACAs (M = .68; SD = 1.15). There were no effects for gender and no interactions. Follow-up analyses comparing subjects whose mothers only or whose fathers only were alcoholic to NACAs were not significant. However, ACAs with two alcoholic parents (M = 2.00; SD = 1.54) displayed significantly higher ambivalence/ resistance toward the mother than NACAs, F (1,63) = 13.54, $p < .001$.

Paternal Attachment.

Security Subscale. There was a main effect for family history for security of attachment to the father, F (1,86) = 9.95, $p < .001$, when all subjects were considered. ACAs (M = .80, SD = .99) showed lower security of attachment to fathers than NACAs (M = 1.44; SD = .90). There were no effects involving gender, so it was dropped from subsequent analyses. Children of alcoholic mothers only did not differ from NACAs in security to father. But, NACAs displayed significantly greater attachment security to fathers than either (a) children of alcoholic fathers3 (M = .78; SD = 1.00; F [1,66] = 6.67, $p < .01$) or (b) ACAs with two alcoholic parents (M = .50; SD = .89; F [1,64] = 13.10, $p < .001$).

Avoidance Subscale. There were no effects involving gender. There was a main effect of family history of alcoholism, F (1,83) = 15.33, $p < .0001$, in regard to

paternal avoidance. Overall, ACAs (M = 1.38, SD = 1.83) demonstrated greater avoidance of the father than NACAs (M = 2.73; SD = 1.28). However, children of alcoholic mothers only were not more avoidant in their attachment relationships with the father than NACAs. As expected, children of alcoholic fathers (M = 1.65; SD = 1.80) showed more avoidance toward their fathers than NACAs (M = 2.73; SD = 1.28), F (1,63) = 7.16, p < .01. Finally, there was a main effect for family history when both parents were alcoholic, F (1,62) = 29.25, p < .0001. ACAs (M = .56; SD = 1.67) demonstrated more avoidance than NACAs (M = 2.73; SD = 1.28).

Ambivalent/ Resistant Subscale. There were no significant main effects or interactions on this variable when comparing NACAs to (a) all ACAs, (b) children of alcoholic mothers only, or (c) children of alcoholic fathers only. However, ACAs with two alcoholic parents (M = 2.20; SD = 1.08) were significantly more ambivalent/ resistant toward their fathers than NACAs (M = 1.06; SD = .91), F (1,59) = 15.69; p < .001).

Discussion

As expected, parental alcoholism affected aspects of the parent-child attachment relationship. Notably, decreased security of attachment to the father and increased avoidance in the child-father relationship was significant among children of alcoholic fathers. These findings were significant if only the father was alcoholic, but were especially strong if both parents were alcoholic. Increased

ambivalence/resistance toward the father was an issue only if both parents were alcoholic. Attachment to the mother was not as vulnerable to parental alcoholism as attachment to the father. In fact, ACAs differed significantly from NACAs in maternal attachment security and ambivalence/ resistance toward the mother only when both parents were alcoholic. Increased avoidance in the child-mother relationship was evident only when the mother was the alcoholic parent.

Gender was not a significant factor in the parent-child attachment. However, the few differences in the attachment subscales derived for mothers and fathers may be due to parental gender role differences. For example, fathers may be less likely to turn to their young adult children for help or comfort than mothers. Thus reciprocity would be more salient in the maternal-child attachment relationship. Likewise, differences in the maternal and paternal avoidance subscales may be gender role related.

The alcoholism of one parent did not affect attachment to the other parent. If the father only was alcoholic, there were no significant differences between ACAs and NACAs in the mother-child attachment relationship. Likewise, if the mother was the alcoholic parent, there were no differences between ACAs and NACAs in attachment to the father. This is an encouraging finding, as there is substantial evidence that having one supportive, stable relationship with a caretaker reduces risk for ACAs (Vaillant, 1988; Werner, 1986). Accordingly, if ACAs have a positive, secure attachment

relationship with the nonalcoholic parent, they are more likely to have a positive developmental outcome. But, the current sample of ACAs is by no means a random one. So, it is possible that the finding that the alcoholism of one parent did not affect attachment to the other parent may lack external validity. The ACAs in this sample have already been quite successful; they were all enrolled in college. Having had a secure attachment relationship with one parent may have buffered them from the risks associated with being an ACA and made it possible for them to achieve this success. ACAs without a secure attachment to at least one of their parents may have been less likely to enter college and thus less likely to participate in this study. Research on the issue of attachment using broader samples of ACAs is required to tease apart this conundrum. Nonetheless, the findings still potently demonstrate that children are likely to have insecure attachment relationships with alcoholic parents. This is particularly true of children of alcoholic fathers. And, children with two alcoholic parents are more likely to have even greater disruption in parent-child relationships.

A few limitations, in addition to those mentioned above, must be acknowledged. First, relatively few male ACAs participated in this study. Male ACAs may be less likely to volunteer to participate in experiments than others. Anecdotally, researchers using college students as subjects commonly report that males are less likely to participate in experiments than females. This phenomenon may be exacerbated

when recruiting an at-risk population of males. On the other hand, male ACAs may be less likely to enter college, either because they are on a negative developmental trajectory or for more innocuous reasons. More research needs to be performed with non-collegiate ACAs to answer this question. Finally, the results are based on a predominantly white and middle class sample. While the sample was representative of the University, the lack of cultural diversity among the subjects limits the generalizability of the findings.

Despite these limitations, the results clearly show that ACAs are at risk for disturbed attachment relationships to their alcoholic parent and that this risk is heightened if both parents are alcoholic. While in the present sample having one alcoholic parent did not significantly increase the risk of an insecure attachment relationship to the non-alcoholic parent, more research needs to be done in this area using a more diverse population of ACAs. In addition, studying a broader age range of individuals would better explicate the role of ambivalence and resistance in adult child-parent relationships.

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Note 1 - When analyzed, this factor yielded no significant findings for any subset of subjects.

Note 2 - It is likely that the comparisons between NACAs and children of alcoholic mothers on the Maternal Security subscale would have been significant given greater statistical power. However, there were only six subjects whose mothers only were alcoholic, severely limiting power in these analyses.

Note 3 - The paternal data was also analyzed using the Security, Avoidance, and Ambivalent/ Resistant factors generated from the PC analysis of the maternal data. In general, the results were very similar across the two models, with only minor variations in significance levels. However, when using the maternal model, there was not a significant difference in security of attachment to the father as a function of ACA status when comparing children of alcoholic fathers only to NACAs.

Table 1

Factor Pattern Matrix from Factor Analysis of Maternal Attachment Data

	Secure	Ambivalent	Avoidant	Resistant
Looks to Mom for Comfort	.875	-.204	.045	-.185
Mom is Able to Help	.874	-.262	.064	-.172
Mom looks to Child for Comfort	.837	.223	-.029	.186
Child is Able to Help Mom	.800	.163	-.161	.134
Ambivalence Toward Mom's Help	-.001	.777	-.007	.007
Ambivalence About Seeking Help	-.079	.736	-.021	-.195
Separation Viewed as Negative	.061	.156	-.814	-.019
Perceived Availability of Mom	.380	.002	-.482	.240
Will Seek Mom during Stress	-.133	-.160	-.624	.082
Will seek Mom in the Future	.106	.070	-.820	-.065
Does Not Keep in Close Touch	.005	.195	.397	.532
Resentment Toward Mom	-.077	.345	.062	-.628
Resistance Toward Mom	.070	.149	. 177	-.682
% of variance	30.00	14.00	12.10	8.50
Eigenvalue	3.89	1.82	1.58	1.10
Total variance	64.5%			

Table 2

Factor Pattern Matrix from Factor Analysis of Paternal Attachment Data

	Secure	Ambivalent /Resistant	Avoidant	Reciprocal
Looks to Dad for Comfort	.983	-.001	.018	-.005
Dad is Able to Help	.993	-.015	-.007	-.012
Dad looks to Child for Comfort	-.022	-.010	-.018	.967
Child is Able to Help Dad	.067	-.028	-.043	.957
Ambivalence Toward Dad's Help	-.088	.649	.150	.002
Ambivalence About Seeking Help	.044	.351	.517	-.217
Separation Viewed as Negative	.037	-.016	-.609	-.098
Perceived Availability of Dad	.327	-.156	-.580	.089
Will Seek Dad during Stress	.364	.140	-.580	.160
Will seek Dad in the Future	.012	.301	-.754	.258
Does Not Keep in Close Touch	-.024	.032	.629	.270
Resentment Toward Dad	.024	.766	-.010	-.135
Resistance Toward Dad	.061	.678	-.132	.112
% of variance	14.80	8.5	30.90	13.20
Eigenvalue	1.90	1.10	4.01	1.72
Total variance	67.4%			

Table 3

Reliability of Factor Scales (Cronbach's Alpha)

	Mother	Father
Security	.89	1.00
Avoidance	.73	.48
Resistance	.40	---
Ambivalence	.56	---
Reciprocality	---	.98
Ambivalent/ Resistance	.51	.53

Table 4

Correlations Between Attachment Subscales and Self-Report of Parent as an Important Source of Security

	Security	Avoidance	Resistance	Ambivalence	Ambivalence/ Resistence
Cites Mother as Important In Providing Security	.48**	-.32*	-.07	-.15	-.31*

	Security	Avoidance	Reciprocal	Ambivalence/ Resistance
Cites Father as Important In Providing Security	.49**	-.47**	.18	.01

* p < .01, ** p < .001